

FORM – SUPPLIER DETAILS

Please read and complete carefully, as this information you provide may affect your payments and tax liability.

Section 1 – Company Details Which Valleyfresh Team Member do you deal with? Company Name ____ **ABN** Trading/Farm Address _____ Suburb/Town Post Code_____ _____Fax (Office) _____ Phone (Office) **Email Address** Accounts Person Name_____ **Business Owner Details** Principal Owner's Full Name Phone (Mobile) Bank Details - Please note, all payments are made via EFT BSB Account Number Account Name Bank Name **Grower Remittance** We are able to submit your grower remittance in below forms, please advise which one you prefer Email _____ Fax ___(___)____



Section 2 – Commonwealth Horticulture Levy

Do you require Valleyfresh to deduct the Commonwealth Government levy on your behalf?

	Yes, please deduct the levy on our behalf	for the following produce we supply to Valleyfresh Exports
	Table Grapes Citrus Cherry Mango	Stone Fruit Pear Other Produce*
OR		
	*Other – Please detail	
+		
	No, Commonwealth Levy is NOT to be paid on our behalf – please complete attached exemption form	
	Our LRS Account number is:	
Decla	ration: I declare, that to the best of	f my knowledge and belief, the information
	lied on this form is correct in every	
Name _		Signature
Date		Title

Company Information for Supplier

Valleyfresh Exports Pty Ltd, ABN 39 165 973 455

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